

NEILLSVILLE MEMORIAL HOME
216 SUNSET PL

NEILLSVILLE 54456 Phone: (715) 743-3101
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? Yes
Number of Beds Set Up and Staffed (12/31/04): 114
Total Licensed Bed Capacity (12/31/04): 114
Number of Residents on 12/31/04: 92

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 96

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	Yes	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		33.7
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		45.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.2	More Than 4 Years		20.7
Day Services	No	Mental Illness (Org./Psy)	21.7	65 - 74	9.8			-----
Respite Care	Yes	Mental Illness (Other)	1.1	75 - 84	25.0			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.2	95 & Over	17.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	4.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.1		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	38.0	65 & Over	97.8	-----		
Transportation	No	Cerebrovascular	14.1		-----	RNs		10.1
Referral Service	No	Diabetes	8.7	Gender	%	LPNs		11.2
Other Services	No	Respiratory	8.7	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	30.4	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	69.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	4	5.5	131	0	0.0	0	1	6.7	159	0	0.0	0	0	0.0	0	5	5.4	
Skilled Care	4	100.0	221	62	84.9	112	0	0.0	0	14	93.3	147	0	0.0	0	0	0.0	0	80	87.0	
Intermediate	---	---	---	7	9.6	93	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	7.6	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	4	100.0		73	100.0		0	0.0		15	100.0		0	0.0		0	0.0		92	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	12.8	Bathing	1.1	73.9	25.0	92
Private Home/With Home Health	2.8	Dressing	19.6	59.8	20.7	92
Other Nursing Homes	2.8	Transferring	28.3	54.3	17.4	92
Acute Care Hospitals	80.7	Toilet Use	28.3	44.6	27.2	92
Psych. Hosp.-MR/DD Facilities	0.0	Eating	81.5	9.8	8.7	92
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.9					
Total Number of Admissions	109	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	8.7	Receiving Respiratory Care	6.5	
Private Home/No Home Health	25.4	Occ/Freq. Incontinent of Bladder	42.4	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	13.1	Occ/Freq. Incontinent of Bowel	26.1	Receiving Suctioning	0.0	
Other Nursing Homes	4.9			Receiving Ostomy Care	0.0	
Acute Care Hospitals	0.8	Mobility		Receiving Tube Feeding	1.1	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	5.4	Receiving Mechanically Altered Diets	60.9	
Rehabilitation Hospitals	0.0					
Other Locations	4.1	Skin Care		Other Resident Characteristics		
Deaths	51.6	With Pressure Sores	5.4	Have Advance Directives	97.8	
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	122			Receiving Psychoactive Drugs	44.6	

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities						

	This Facility	Other Hospital-Based Facilities	All Facilities			
	%	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	84.2	91.7	0.92	88.8	0.95	
Current Residents from In-County	90.2	85.3	1.06	77.4	1.17	
Admissions from In-County, Still Residing	23.9	14.1	1.70	19.4	1.23	
Admissions/Average Daily Census	113.5	213.7	0.53	146.5	0.78	
Discharges/Average Daily Census	127.1	214.9	0.59	148.0	0.86	
Discharges To Private Residence/Average Daily Census	49.0	119.8	0.41	66.9	0.73	
Residents Receiving Skilled Care	92.4	96.2	0.96	89.9	1.03	
Residents Aged 65 and Older	97.8	90.7	1.08	87.9	1.11	
Title 19 (Medicaid) Funded Residents	79.3	66.8	1.19	66.1	1.20	
Private Pay Funded Residents	16.3	22.6	0.72	20.6	0.79	
Developmentally Disabled Residents	0.0	1.4	0.00	6.0	0.00	
Mentally Ill Residents	22.8	32.7	0.70	33.6	0.68	
General Medical Service Residents	0.0	22.0	0.00	21.1	0.00	
Impaired ADL (Mean)*	44.3	49.1	0.90	49.4	0.90	
Psychological Problems	44.6	53.5	0.83	57.7	0.77	
Nursing Care Required (Mean)*	9.2	7.4	1.25	7.4	1.24	